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REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL

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information unless it displays a valid OMB control number.					
Application Number	10/716,459				
1 (32110 0)	10//10,432				
Filing Date					
	November 20, 2003				
First Named					
Inventor	NAKAMURA				
Art Unit					
	2628				
Examiner Name					
	Roberta D. Prengergast				
Attorney Docket					
Number	HITA.0463				

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application.

Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plan application filed prior to June 8, 1995, or to any design application. See instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

Request for Cor 1995, or to any	ntinued Ex design ap	amination (RCE) practice under 37 Colication. See instruction Sheet for R	FR 1.1 CEs (r	114 0	be subn	apply to an	iy utility or plan application B USPTO) on page 2.	on filed prior to June 8,		
a. 口 Previ i. 口 ii. 口 iii. 口 b. 图 Enc i. 图	iously su Consid Consid Other_ closed Respo	er the amendment(s)/reply und er the arguments in the Appeal	Brief iii.	f or	Reply B	rief previ - ation Dis	sly filed lously filed on closure Statement (I month Extension of I	•		
 Miscellaneous a. □ Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of months. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(i) required) b. □ Other 										
 3. Fees The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed. a. ☑ The Director is hereby authorized to charge any additional fees, or credit any overpayments to Deposit Account No. 08-1480 i. ☑ RCE fee required under 37 CFR 1.17(e) ii. ☑ Extension of time fee (37 CFR 1.136 and 1.17) iii. ☑ Other Excess claims fee b. ☑ Checks in the amount of \$790.00 for the RCE fee ais enclosed c. ☐ Payment by credit card (Form PTO-2038 enclosed). Warning: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. 										
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED										
Name (Print/Type)		Juan Carlos A. Marguez			Reg	egistration NO. (attorney/agent)		34,072		
Name (Print/Type)		Stanley P. Fisher) 		Reg	Istration NO. (attorney/agent)		24,344		
Signature		AUCH -			-Dat	0	September 17, 200	17		
// CERTIFICATE OF MAILING OR TRANSMISSION										
mail in an enve	elope add	correspondence is being deposited ressed to: Commissioner for Paten Office on the date shown below.	with t	the l	Jnited St CE, Was	ates Post hington, [al Service with sufficier OC 20231, or facsimile	nt postage as first class transmitted to the United		
Name (Prin										
Si	gnature					Date				

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Tradearmk Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND Fees and Completed Forms to the following address: Assistant Commissioner for Patents, Box RCE, Washington, DC 20231.

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